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ABSTRACT

This paper outlines a model for assessing and managing psychological depth in outdoor and experiential group work, and presents two case studies of the complexity of such management in real life. The model contains eight levels of emotional risk and presents four criteria for assessing the level to which a particular event or discussion may lead the group. These criteria are the speaker's involvement in what is being said, who else is involved in what the speaker is saying, to whom would the speaker normally disclose what is being discussed, and the potential emotional arousal in what the speaker is saying. The first case occurred during a year-long adventure leadership program for teachers in New Zealand. One participant accused another of stealing and using her credit card. It was revealed that the accused was reaching an acute stage of closet bulimia and was highly distressed with guilt about the theft and shame about the bulimia. In the second case, teenagers were taking part in a month-long sea kayaking course, and a high level of interpersonal trust and emotional safety developed in the group. A 15-year-old female participant disclosed to a group leader that she had been sexually abused by her brother for years. Discussion of the two cases focuses on reactions of the leaders and the groups, ethical questions, useful interventions for managing emotional risk, and the vulnerability of both participants and leaders. (SV)

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Case Studies in Managing Psychological Depth

By Martin Ringer & H L. "Lee" Gillis

Introduction

In our 1995 article (Ringer and Gillis, 1995) we outlined a system for assessing and managing psychological depth in groups. Since first beginning to develop the framework in late 1992, we have run many workshops and had some wonderful feedback about both the shortcomings and the utility of the framework. After all, the test of any model is its applicability in the real world. In this paper we briefly present the original model before applying it to two real-life cases that have been offered to us by people from around the world.

Most of the interest in psychological depth has emerged from practitioners wanting to minimise the danger of psychological damage to participants as a result of engaging in inappropriately deep psychological levels. In this paper we will focus primarily on the management of psychological risk (Ringer & Spanoghe, 1997). A new factor that has recently emerged in discussions about managing psychological risk is the emotional vulnerability of the leader or facilitator when "depth" issues emerge in a group. The paper is based on case studies that illustrate some of the complexity of managing psychological depth in real life. Both cases presented below illustrate the vulnerability of both leaders and participants, and allow us to examine how the leader's own welfare is also an essential part of the system.

The eight level model

There are eight levels in our model of psychological depth (Ringer and Gillis, 1995). These levels range from "surface" at which group members aren't likely to experience much risk of emotional damage, through to "universal" at which participants are likely to feel very emotionally exposed. The model, as summarised in Table 1, below, is intended to be of practical use to group leaders and so we have provided four criteria that act as guides to which level any event may lead the group. These four criteria are presented as questions that the practitioner may ask him or herself. Our view is that the four criteria provide pointers to how "deep" group members may be drawn by a statement or event in the group. Speaker involvement - the first criterion - suggests that the greater the

speaker's immersion in the event in question the greater the psychological depth. Involvement of significant others or original caregivers suggests quite deep levels, and involvement of spiritual entities *may* suggest even deeper levels. The criteria in the last two columns in Table 1 are more subjective and more likely to vary from participant to participant. They deal with perceptions of appropriate disclosure and with prediction of emotional arousal.

Emotional safety is a complex phenomenon that depends on many factors other than those described in the "levels" shown in Table 1. Susan Vincent describes another conceptual framework that is useful in the area of psychological risk or safety in her thesis and subsequent article in the *Journal of Experiential Education* (1995). Susan describes emotional safety as "...the amount of trust an individual has in his/herself, the group members, the instructors, and the environment..." (Vincent, 1994, p. 69).

Emotional safety and psychological depth are not the same thing. It is possible to deal with very deep issues and still have participants feeling relatively safe. "Deep" levels become unsafe when the group has not agreed to work at depth. For this reason, contracting of the group is an important precursor to working safely at deep levels because the contract provides the "container" for the work. However, a full exploration of the relationship between psychological depth and emotional safety is not possible in this space, so we will now move to the two case studies.

Application - case studies

We present the two case studies below, with some discussion (all significant details have been changed to protect the identity of key players).

Case 1: Leadership trainees in New Zealand.

This story is a combination of a narrative and an interview. Sam, the leader, provided us with the basic story and then we talked with him to obtain a fuller picture. Even now, as we read this story we are aware of how much more important information we could include if space allowed. But now, over to Sam:

Hi, I'm Sam Twosett, a 41-year-old experiential educator who is co-leading a year-long adventure leadership program for teachers. An assistant instructor, who became involved a little later, was Andy Ahrmahli. This story involves one member of a group accusing another of stealing and using her credit card to buy electronic equipment. It turned out that the accused was reaching an acute stage in her closet bulimia and was in a highly distressed state involving both her guilt about the credit card theft and her shame about the bulimia and the messages from her group members that offered support and understanding.

It may be a moot point that both staff members were male. The group was 21 in number, mostly young adults with at least one university degree who were part of a 12 month teacher education program. 12 participants were female and 9 male, with a racial mix of 16 whites, 2 Asians and 2 Maori and one Samoan. Age ranged from 24 to 32 so there is no question of "in loco parentis" here. The "blow-up" happened in the ninth month of the program, which allowed time for resolution, as it turned out. There were all sorts of "interesting" complications, such as the

dispersal of the group to teacher placements (a highly stressful event in itself) just over a week after the first revelation of the problem.

For all of us, except the central figure, it was our first experience with bulimia, and with the strength and quality of emotion which surrounded the issue on all sides we were seriously beyond our knowledge and competence. Quite frankly, I was frightened.

Table 1
Criteria for Assessing Psychological Depth in Groups

Question Level	In what way is the speaker involved in what the speaker is saying?	Who else is involved in what the speaker is saying?	As a leader, with whom would I expect the speaker to disclose what they're saying?	As a leader, how much potential emotional arousal exists in what the speaker is saying?
Surface level	They are not	It's about other (usually nameless or generalised) people	Anyone, this appears to be public information	Very little
Personally experienced level	Only in their social or professional role	Friend, colleagues, and workmates	Anyone in their social setting	Variable - from very little to intense emotion
Current task level	Only as a member of this group right now	The people in this current group	Members of the current group	Usually little
Encounter level	Only as a member of this group right now	The people in this current group	Members of the current group	May involve a high level (eg anger, joy, sadness, excitement)
Contextual level	As a member of their current social, work or family group	Current family, classmates, pets, workmates, friends and colleagues	Friends and intimates	Often involves a high level (eg rage, ecstasy, depression, love)
Identity formation level	Very involved This is who they are	Memories of family of origin May involve recall of childhood trauma	Trusted companions and therapists	Usually involves a high level (eg despair, hopelessness, helplessness, love)
Historical /cultural level	Completely involved "These are my people"	Ancestors and cultural heroes	Facts can be discussed in public, but feelings are only discussed with trusted associates	May evoke feelings of patriotism, loyalty and pride to deep rage
Universal level	Immersed This is life itself	Spiritual entities (God)	Facts can be discussed in public, but feelings are kept absolutely private	Map tap feelings so powerful as to create existential ecstasy or doubt about existence of self or life's purpose

How were the issues of bulimia and of stealing dealt with in the group?

A student, Anne, came to Sam privately and, in distress, said that her credit card had been taken and used by roommate, Sarah, who was also a member of the class. Anne did

not know what to do. Her concerns centred around the reputation of the programme, recovering her losses, hurt at betrayal, loyalty to the community which the class had built up and a worry that her Sarah needed more help than condemnation. Anne said she thought that Sarah had an eating disorder, but couldn't be sure. Her decision to notify the police was troubling her. Anne and Sarah had discussed their relationship and the theft but Anne was not satisfied that they had yet got it right.

At that time the class was working on group dynamics and there was a session that very evening involving a short hike and discussion of scenarios. It occurred to me that here was a group threatening, real-life situation, which had far more value and meaning than any invented scenario. I suggested that Anne raise the issue with the class in a context, which I would set up. Sarah was to be notified in advance that the class would be talking openly about the situation as a problem of community life, which needed to be dealt with. Sarah's willingness and readiness (however reluctant) were secured so that she was not ambushed.

We met in a comfortable hut where the group had often worked and lived before. I introduced the topic and Anne stated the issue and what she had done so far as well as what help she thought was needed. As the story unfolded, the mood in the group shifted from normal, through interest, to mild horror. Sarah then spoke, confessed to the theft, and explained how she was unsure of family support for restitution. Then she dropped the bombshell of her misery with bulimia and the false-face life she had been leading as a distinguished varsity athlete, strong, confident outdoorswoman etc. There were many tears. At this stage the group was shocked and silenced. The only sound was Anne and Sarah's quiet crying and some murmurs as those who sat beside them trying to offer comfort.

The surge of emotions in the room left me feeling "out-of-depth." I was ignorant of bulimia, having previously associated it exclusively with anorexia, and it was clear that his woman was not anorexic. The students seemed to be unable to deal with the revelations and their possible meaning. It was as though this strong resourceful community now found itself paralysed and powerless.

At this point, I did the thing that Anne and I had talked over as likely a desirable activity. I asked students to hike alone or in small groups on loops of their own choosing in the vicinity of the hut, planning to be back in not more than an hour. I took care that Sarah was fully included and had mutually agreeable company. I was frankly afraid to leave her alone.

On return, tea and snacks were available while the whole group sat and discussed their reflections on the revelations, moving from "how do you feel?" to "what might be done to help?" The community tried to secure the emotional safety of Anne and Sarah, but I continued to be worried, in my ignorance, of the possibility of suicide or other self-destructive behaviour for Sarah. I was unsure, even, what to look for as early warning signs.

The class ended with some action steps laid out. A support group was to form for the two women. Sarah was to come to my office next day to begin the process of finding help for her bulimia and her overall condition, particularly with the threatening event of moving to distant town for a demanding practical placement at a school within five days.

Two voices were at war in me. One was a sort of horror, the same I felt as I watched an open canoe with two paddlers go over a falls. This voice sounded out my ignorance and unreadiness for serious emotional trauma. It's partly disbelief and partly recognition that this is possibly the BIG ONE that everyone fears. It's not exactly unexpected. The

other voice followed on from the predicability that sooner or later, if you mess about in people's lives, this sort of thing will happen. This voice had confidence: You have resources for dealing with this. The abilities and humanity of the students will effect a rescue. This is what you have been trained by experience and instruction to deal with at the emotional "first-aid" level at least. So stay cool, and look for healing and "wholing" opportunities. Be patient, relaxed, radiate the belief that this is normal and can be handled well. Then loop back to the beginning of this paragraph.

Next day, with Andy Ahrmahli handling part of the research, we dug out information on bulimia in general and on specific therapeutic options available. It was a great relief to speak to women who were ready to see Sarah whenever she wished. Through our institution we had immediate psychological and dietary counselling available. Several groups sent us detailed fact sheets by fax. Still shaken by what seemed to me to be an emotional and psychological "close call," I felt much less torn internally and much more cheerful when meeting Sarah to discuss her options for getting treatment while at the same time continuing in her professional training program without prejudice.

In later follow through, Andy Ahrmahli was a confidant and adviser to Sarah, as well as myself. The instructional staff worked as a team on this issue.

What were the most useful interventions you think that were made?

Patience, tolerance, acceptance and a positive non-judgemental attitude by everyone were useful. I think that the gentle one-hour hike for reflection set a tone for being patient and taking a long-term view of the situation. Coincidentally, it was a lovely soft gentle late evening. For me, buying that kind of time in order to gain knowledge and avoid irretrievable error was a critical positive move.

I recall that there were some humorous remarks passed towards the end of the critical class period. These were really warm and generated smiles and chuckles all round. That too, was an important contribution to making the climate more "normal." I'm aware of the way in which humour can be used to avoid important issues or even as a form of attack, but this was appropriate humour.

Were there any unhelpful actions that occurred?

I can't remember any. As I think of it, the class in community behaved with splendid forbearance, care, and maturity.

From your point of view, was this closed?

The relevant sequelae were that Sarah sought immediate therapeutic support, which did not work well given the stresses of her teacher placement. After that, she found other support and began a regime, which, over time, has given her a healthy eating pattern due to the underlying psycho-social changes she has developed. Sarah's family, contrary to her expectation, were supportive and the theft was made good without further legalities. Anne received general approbation from the class for her courage and sensitivity in identifying a complex wrong and contributing to righting it. The community formed by the class became very strong up to the time of being disbanded about three months after the events described above. Andy and I now know more about bulimia than we believed possible. And that's good because this little problem has become much more prevalent

among young women and possibly young men in the outdoors field and all instructors need to be well informed. All's well that ends well?

I have struggled to give you the rich description you require because I am deeply concerned that it is very difficult to provide it without identifying the persons involved. All the group members are connected with outdoor and experiential education and even in an international community, the word gets around. I think that people who were deeply involved in this scene have enough experience of all the key players to have developed respect for them. My concern is that any description like the one I've give here lacks the richness of human experience and hence carries the risk of the reader making negative judgements about the people involved. That could be destructive given the amount of integrity shown by all participants throughout. But we need to be able to talk about such events so that we can share our learning.

I suggest that we start to grapple with confidentiality issues and how they may block institutional and professional learning from uncomfortable events. In this case we wanted to afford Sarah confidentiality about her eating disorder and so we were not able to take the story back to our institution as a whole. I'd like to find a way in which we can deal with this differently.

Discussion and questions on case one.

What level of psychological depth was the group invited to when Sam introduced the topic of Sarah's theft? We might say, "Encounter" because the topic was pretty much about the nature of interaction in the group. But "theft"! Doesn't that feel very risky and deep? With powerful issues like theft and honesty, many group members would have revisited their earlier experiences where they would have experimented with theft as children. So these "heavy" topics tend to pull us deeper, even when there is not an explicit acknowledgment of this depth. Sam felt this and hence felt overwhelmed.

But then the additional complication of bulimia was raised almost simultaneously. Bulimia is known as a serious emotional/psychological disorder. Whilst this does not explicitly visit early life experience, it too moves the group towards the "identity formation" level because it is evocative of primitive experiences of being out of control of one's own life.

Remember that the purpose of this group was to enable education undergraduates to develop the competencies to use adventure education in their future work places. There was not contract for therapy. In theory, there was no contract to deal with the psychological aspects of the theft or the bulimia, but the theft in particular directly impacted on the ability of the group to carry out its primary task — that of interacting in a way that led to improved adventure leadership competencies. So Sam had no choice but to deal with the theft, and hence to open the group to knowledge of Sarah's bulimia.

Some questions we may consider include:

- How did Sam, Sarah, Andy and Anne collectively establish a safe context that honoured the original contract for developmental work rather than therapy?
- Did, in fact, the group avoid a therapy session?
- Was the group run according to the original contract?
- What levels did Sam experience inside himself?

- How did he translate his own functioning into action in the group? (e.g., did he always express in the group his own internal process and hence invite the group to the same level?)
- What actions on the part of any or all participants and leaders did you see as appropriate and which did you see as appropriate?

Case 2: Sea Kayaking in temperate climates.

Jessica, one of the leaders of an extended maritime journey, presents this case as a narrative. The country is not specified and all of the details have been changed.

I choose this case study because it is the straw that tipped the camel's back so-to-speak and led me directly to university to learn more about human change processes after six or so years working with adolescents in the outdoors. I choose it because it is dramatic but very typical as well. This, and many stories like it, happens all the time in my opinion with groups on multi-day programs. When an atmosphere exists in which teenagers/people feel safe emotionally and there is a high level of trust and respect amongst all members of the group (instructors included) things come out. As an instructor, I strive for that atmosphere. Don't we all? At the time, I thought that was entirely the point. But, I choose it mostly because at that time, I consciously leaned towards encouraging this kind of atmosphere (e.g., openness, respect, and trust) and in this instance the results really threw me for a loop and challenged my whole definition of emotional safety. Remember that this was a "normal" personal and social development program using adventure as a medium and we did not have a contract for "therapy."

About half way through a month-long day course, while chopping green pepper for dinner, (settled in to a wonderful cove, with clear weather, comfortable group feeling about our journey) Vicki (15 yrs.) told me that her older brother had been sexually molesting her since she was age 7. I knew it was coming. I didn't know exactly what "it" was but it had been building for the previous five or six days. Her seeking me out to just talk about life, her telling me she needed to tell me something but being afraid to. I found myself relying on my gut feeling almost entirely during this build up. I knew deep down that I had a responsibility to the rest of the expedition members. I knew that I had a responsibility to contact the "authorities" should she reveal that she had been molested or abused in any way. I knew deep down that it probably wouldn't be the best thing for her to confide in me because of a thousand reasons. And yet, I was flattered that this girl trusted me. The feeling of being the one and only person in her life that she'd trust to confide in was powerful. The knowledge that she'd held onto a secret, regardless of what it was, and due to the combination of factors, which made up this course, here, now, she wanted to let that secret out, to me. Whew, it was overwhelming. So, even though I went through the motions, I tried to connect her to other girls in the group, I tried to evenly distribute my time between everyone, I told her that I had an obligation to report any abuse or neglect to Family and Children's Services, she told me. Deep down, in myself, I wanted her to. She told me how scared it made her whenever her brother was around and how at night she got so scared that she sometimes slept in her closet for fear that he would come to her room. She told me that she hadn't told anyone in her life this secret. She begged me not to tell anyone.

Do I respect her request for privacy or do I call program administrative staff on the HF radio -- and if I do this, how on earth do I keep the rest of the group (not to mention

half of the fishing boats in the area) from hearing this conversation? Do I share this with my co-instructor? He is a twenty-two year old man, the same age as Vicki's brother. Does that matter? Is there any immediate danger here tonight? Do I respect the rest of the group and acknowledge that there is, in fact, something going on with Vicki because my gut tells me that the rest of the group is aware of it anyway? Do I sleep on it? I slept on it.

The next morning, post morning dip but pre-breakfast, she asked me to talk with alone and told me that what she didn't tell me was that she was in love with her brother. That even though it scared her, it also made her feel good and grown up that a man wanted her physically. She brought out a photograph of him. In a flash, I saw in her eyes, adoration, lust, dependency, and devotion. Also in that instant I knew that even as an adventure group leader with six years experience working with teenagers in the field, I was in way over my head. I didn't have enough information, enough history, enough energy to "help" this girl in the way that I wanted to, given that we were in a secluded cove away from a phone. She was one of twelve group members, we still had another 13 days together, there was another student who was sick and might require a medical evacuation and I was working with an extremely capable but brand new co-instructor. But even stronger, regardless of clearly knowing my professional responsibilities, from that moment on, I struggled with my professional responsibilities and my heart. I was led into this field because I care about adolescents and love the opportunity to be a part of presenting new options to them and seeing what they do with those options. I can't be real or genuine without caring about these kids. Here was a girl who was in such pain, feeling so confused and that left me feeling that I just wanted to help, somehow.

And so the ball started rolling. Quickly it rolled out of my hands. I did eventually share with the group that there was something going on and I would appreciate their help while we sorted through it. I did eventually bring my co-instructor into it by requesting of Vicki that I confide in him and why I needed to (safety the rest of the group, etc). I did talk to program administration (via regular phone) and then to her psychotherapist who warned me that Vicki was manipulative and she doubted highly that there was any sort of sexual abuse occurring in the family. I did remind Vicki that no matter what I had to report this information to authorities and the program manager (even though in my head I was already trying to rationalise my way out of that mandatory reporting law). And lastly, Vicki, once she started talking, didn't want to stop. So I listened while trying really hard not to say much myself.

To make a long and painful story shorter (although the "processing" part of this story could go on and on). After much discussion with my program manager on the ramifications of reporting this revelation (could this really have been Vicki manipulating me to get my undivided attention? It certainly worked.) I reported it to Family and Children's Services. They said that if there was any suspicion that this girl was being actively molested by a person who was living in the home, that it was their immediate duty to keep her safe and therefore would keep her from going back into the home while they conducted their investigation. They said they would intercept her at the airport as she arrived back home from her wonderful wilderness sailing expedition. They also told me that once reported, I was no longer allowed to know anything about the case although I could request a notification of whether the results of the investigation warranted opening a case or not. That's it, no details of what happened.

That's where it ends. I still don't know what the end result of her confiding in me brought to her life. I know after hours of thoughtful discussions with program administrators that I really had no choice about reporting. Perhaps what was needed in

this family was exactly what happened, to have this secret revealed whether it was true or fabricated. But none of that helped the "heart" part of me. Nothing helped the feeling that I was directly responsible for taking the ball so-to-speak and throwing it into someone else's hands. Or that perhaps I allowed myself to be manipulated and that my attention was directed away from those other nine students who deserved as much from their expedition as Vicki did. In a word, it sucked. But then again it was a huge learning experience and it enabled me to really think about what being an instructor really means and all the varying levels of responsibility that keeping the group physically safe is the easy part. Keeping the individual or the group or the instructors safe emotionally, that requires an ongoing alertness and awareness which is really easy to let slip by becoming caught up in the emotion of the moment.

Discussion on Case study two.

Jessica described how her own wish to be trusted led her deeply into a very stressful situation with a client. Intuitively she knew that she was heading in too deep for her own level of competency, but she also knew intuitively that Vicki needed someone to talk to. How could she make her decision whether to engage or not to engage with Vicki?

In our model sexual abuse in the original family lies at the level of identity formation and hence, particularly when discussed in a group, leads to psychotherapy. Even if Vicki was talking about sexual aspects of a simple legal romantic relationship it would be in the deepest substrate of the contextual level. So normally, matters like sexual abuse and troublesome sexual relationships do not have a place in developmental programs. Did Jessica act unethically or did she respond, as she should have?

Jessica was clear that she strives for an atmosphere of openness and trust in her groups and it is this atmosphere that encourages deep levels of self-disclosure. Should we limit the building of openness? Should we discourage the development of strong levels of trust? Most would be horrified by this idea. So what can we do instead?

Jessica's story also highlights that sometimes "deep" events in groups will reveal events that legally require mandatory reporting of criminal offences. This bursts the bubble and can completely contradict the implicit contract between leader and group for confidentiality. Perhaps we need to warn groups up-front of our legal obligations for mandatory reporting.

In discussing this case some of the matters we may examine include:

- How do we foster trust and openness in groups and still honour the contracted level of depth?
- What can we do when we get "early warning" cues that a client is going to make a significant disclosure?
- What proactive means do we have for warning clients about our duty of disclosure - or should we warn them?
- How do we balance between a very needy group member and the needs of the whole group?
- What means do we have for managing the boundary between individual disclosure and whole-group discussions?

Conclusion

Psychological depth is a complex dynamic phenomenon that is difficult to determine in real life. Emotional safety is even more complex and dependent on context. In presenting and discussing these two scenarios we hope that readers have been stimulated to think deeply about how they deal with issues of psychological depth and emotional safety in their own programs. We will avoid the temptation of attempting to produce a definitive statement about what went on in the above two scenarios and we hope that any frustration arising from our decision will lead you to even more learning.

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